

PART B - FEE(S) TRANSMITTAL

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27777 7590 08/13/2012
PHILIP S. JOHNSON
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November 13, 2012

Crystal Washington

(Depositor's name)

/Crystal Washington/

(Signature)

11/13/2012

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/601,455

06/23/2003

Rosenberg Meir

COD5001USNP

9738

TITLE OF INVENTION: IMPLANTABLE MEDICAL DEVICE HAVING PRESSURE SENSORS FOR DIAGNOSING THE PERFORMANCE OF AN IMPLANTED MEDICAL DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1740

\$300

\$0

\$2040

11/13/2012

EXAMINER	ART UNIT	CLASS-SUBCLASS
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DEAK, LESLIE R

3761

604-009000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

1 _____

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY) **Reel/Frame: 014228/0428**

CODMAN & SHURTLEFF, INC.

RAYNHAM, MA

Recorded: 06/23/2003

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☐ Advance Order - # of Copies _____

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☐ A check is enclosed.

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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /Eugene L. Szczecina, Jr./

Date November 13, 2012

Typed or printed name Eugene L. Szczecina, Jr.

Registration No. 35029

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